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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *None*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR  COUNTRY NETHERLANDS	SHEETS  DRAWING 3	TOTAL  CLAIMS 15	INDEPENDENT  CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged  Examiner's Signature _____ Initials _____				

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TITLE  
 Lithographic projection apparatus and particle barrier for use therein

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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